DOCUMENT RESUME

ED 305 995 PS 017 898

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TITLE The Cultural Context of Development in 9-Month-Old Babies: A Comparison of Haitians, Quebeckers and Vietnamese.
PUB DATE Apr 89
NOTE 13p.; Paper presented at the Biennial Meeting of the Society for Research in Child Development (Kansas City, MO, April 27-30, 1989).
PUB TYPE Reports - Research/Technical (143) -- Speeches/Conference Papers (150)

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS Beliefs; Comparative Analysis; Cross Cultural Studies; *Cultural Differences; Cultural Influences; *Economic Factors; *Ethnic Groups; Family Environment; Foreign Countries; Haitians; *Immigrants; *Individual Development; *Infants; Parent Attitudes; Personality; Vietnamese People
IDENTIFIERS French Canadians; *Quebec

ABSTRACT

In a multicultural study involving three ethnic groups, an attempt was made to evaluate features of an infant's developmental niche in the context of immigration. Four dimensions are reported: (1) parental beliefs about child development; (2) aspects of the baby's physical and social environment, including number of caretakers, crowding of the dwelling, sleeping arrangement, visits outside the home, available toys, etc.; (3) maternal perception of the infant temperament; and (4) assessment of the infant's development. A total of 22 Haitian, 21 Quebeckers, and 20 Vietnamese 9-month-old first-born babies and their mothers participated in the study and were visited twice at their homes by a research assistant belonging to their cultural group. Results indicated several significant differences between groups in parental beliefs, in the way the mothers structure the environment and in their perception of infant temperament. Several similarities were found between the Vietnamese and the Haitians, suggesting that at least during the infancy period child care practices and parental beliefs are related more to the economic level of society than the cultural level. Consonance among the different components of the developmental context and their respective relation to some ecological aspects of the immigrant group are discussed. (Author/RH)

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THE CULTURAL CONTEXT OF DEVELOPMENT IN 9-MONTH-OLD BABIES: A COMPARISON OF HAITIANS, QUEBECKERS AND VIETNAMESE.

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Poster presented at the biennial meeting of SRCD, Kansas, Mo. April 1989

Abstract

In a multicultural research involving three ethnic groups (French speaking Quebeckers, Haitians and Vietnamese) we attempted to evaluate features of the infant's developmental niche in the context of immigration. Four dimensions are reported here: 1) parental beliefs about child development (Ninio's questionnaire), 2) aspects of the baby's physical and social environment (number of caretakers, crowding of the dwelling, sleeping arrangement, visits outside the home, available toys, etc.), 3) maternal perception of the infant temperament (R-ITQ), 4 and finnally assessment of the infant's development (Bayley). 22 Haitian, 21 Quebec and 20 Vietnamese 9-month-old first-born babies and their mother participate in the study. They were visited twice at ther home by a research assistant belonging to the same cultural group.

Results indicate several significant differences between groups in parental beliefs, in the way the mothers structure the environment and in their perception of the temperament. Several similarities are found between the Vietnamese and the Haitians suggesting that at least during the infancy period the child-care practices and parental beliefs are related more to the economic level of the society than the culture itself. The consonance among the different components of the developmental context and their respective relation to some ecological aspects of the immigrant group are discussed.

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Theoritical background and aim of the study

Following Caudill's work (1969), a growing body of research documents the cultural diversity of mother-infant interactions. However, Ogbu (1981) wrote, to really understand what is going on, these variations have to be related to the specific context of the group, especially in the case of immigrant and ethnic minority groups. Three main components of the developmental niche are described by Super and Harkness (1986): the physical and social settings in which the child lives, the culturally regulated customs of child rearing, and the psychology of the caretakers (naive theorie and affective orientations). Parental beliefs seem to act as a framework within which parental perceptions of the child are set and which guides parental behavior.

In a research involving three ethnic groups (one Quebec group and two recent immigrant groups, Haitians and Vietnamese) we attempted to evaluate features of the infant's developmental niche. Four dimensions are reported here: 1) the parental beliefs about child development (a modified version of the Ninio's questionnaire comprising 66 questions), 2) aspects of the baby's physical and social environment (number of caretakers, crowding of the dwelling, sleeping arrangement, visits outside the home, available toys, etc.), 3) maternal perception of the infant temperament (R-ITQ), 4) and finally assessment of the infant (Bayley).

Method

22 Haitian, 21 Quebec and 20 Vietnamese 9-month-old first-borns and their mothers were visited twice by a femal research assistant belonging to the same cultural group. All sessions (interview and observation) were conducted in the mother's language. In order to minimize the effect of interview variability, assistants were intensively trained and continuously supervised; all directives were doubled-back translated. Mothers' mean age is 27.5 years (range 21-38), average education 11.6 years (range 6-16) and average years of residence 5.6 (range 1-14). No differences between groups are found on the last two factors.

Results

1. Parental beliefs about child development

The whole interview on maternal beliefs (only the most theoritical relevant results are reported here) supports LeVine's theory (1974, 1988) in parental goals. Migrant mothers focus more on the first parental goal described by LeVine, that is the infant's health (see table1). They think that the maternal role is at this level (physical child-care and stimulation). Concerns for the psychological question appear secundary. In opposite, Quebec mothers consider that playfullness, happyness and smiles reflect the easiness of a baby. In a future perspective, Haitian and Vietnamese mothers believe that teaching social skills (politness, sharing, obedience, conformity, etc.) and giving formal instruction are the important points: these are considered as the aim of education in childhood. Formal instruction is view as a way to give to their children the usefull competences to ensure their own economic subsistance (the second goal of LeVine) in an urban context .

Furthermore, migrants believe that the baby acquires basic cognitive skills such as vision, hearing, recognizance of parents and others familiars, thinking and understanding later than Quebeckers (see figure 1). And they seem to delay till a later age, as LeVine stated, the transmission of cultural values (the third goal), this is true for the introduction of stimulation activities and specially for cognitive activities but occurs also for obedience and social conformity (see figure 2).

However, the two migrant groups are for some domain different. Vietnamese mothers appear quite different from the others. They look like emotionally distant from the baby: contrary to the others they do not mention the affective domain as an important aspect nor think that their role has to focus on.

2. Social and physical environment

The environment is also quite different in the individual groups. Haitian and Vietnamese babies experience more proximity with the mother and more relationships with familars: 80% of these babies sleep in the parent's room even though some have their own room (see table 2). They live in more crowded dwellings with more adults present but they go outside less often than Quebeckers, have considerably less toys and less small objects to play with (see table 3).

3. Maternal perception of the infant temperament

MANOVA of the Carey questionnaire indicates highly significant differences between ethnic groups on four of the nine dimensions (rythmicity, adaptability, approach, distractibility) and on the global score (see figure 3 and table 4). 91% of Haitian and 95% of Vietnamese babies are scored on the difficult pole compared to 28% of Quebeckers. However mothers report to experience the difficultness of their infant differently. Due to their cultural values and expectancies, only Vietnamese mothers consider that their infant is more difficult than average...

4. Infant's development

No differences are found between groups on the Bayley's scores (see table 5).

Conclusion

These findings emphasize a cultural diversity of parental beliefs, child care practices and maternal perception . They demonstrate the consonance among these different components of the developmental context. Several similarities are found between Vietnamese and Haitians, suggesting that at least during the infancy period the child care practices and parental beliefs are mainly related to the economic level and the infant mortality rate of the society and secundarily to the culture itself. During this period, migrant mothers are mainly preoccupied by the health and the survival question. In consequence, they are sensitive to the dependency of the baby, his lack of knowledge, his needs of proximal contacts and basic care. They offer few toys and introduce at a later age all the stimulation activities. Such findings question the relevance of the usual framework of the analysis mother-infant relationship. Staying behind this framework will lead inevitably to the conclusion that all migrant environments of this research are "at risk" (very few toys, different maternal representations, difficult temperament, etc.). Babies assessments do not support this conclusion, at least for the 9-month-olds, even if the question of the future adaptation and the scholarship is still questionned. A more relativist model is needed specially for the purpose of intervention.

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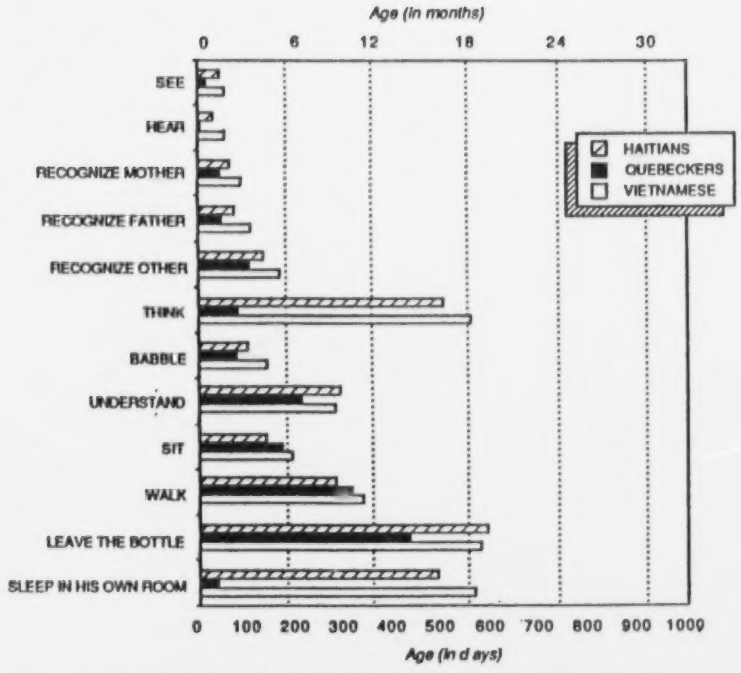

Fig. 1: Developmental milestones according to the mothers (when $p < .05$)

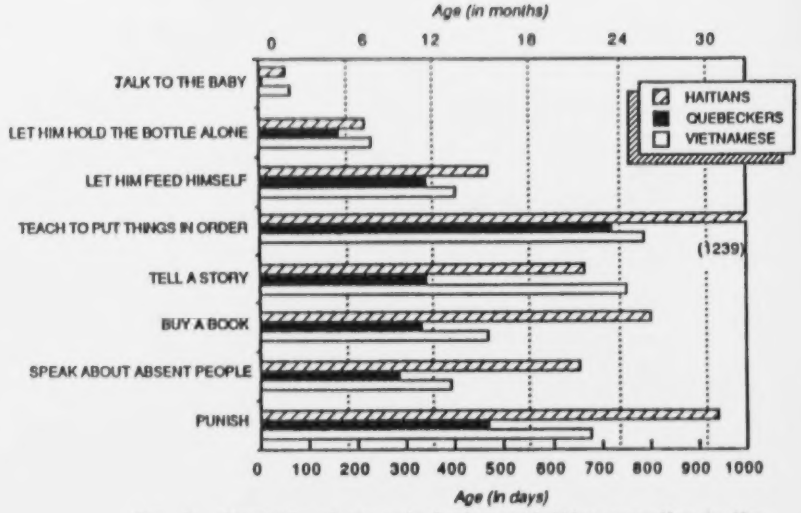

Fig. 2: Timetable of the stimulation activities according to the mothers (when $p < .05$)

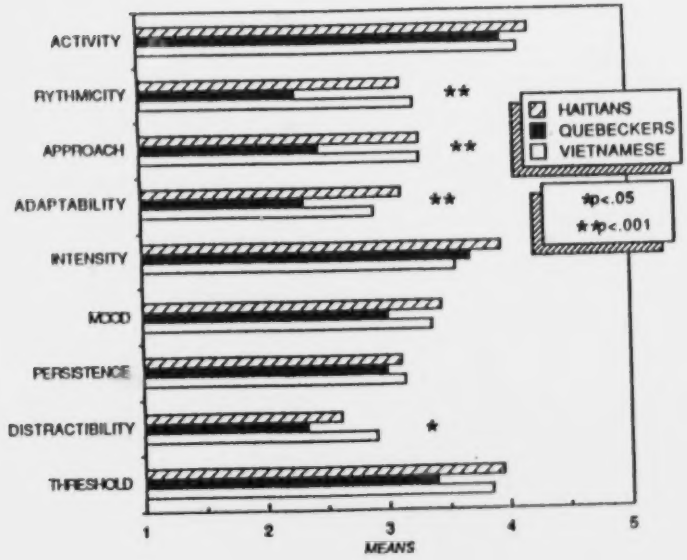

Fig. 3: Mean scores on the nine dimensions of the ITQ-R

Table 1

Maternal expectancies and goals for the baby

	Haitians	Quebeckers	Vietnamese	p
What is a good baby for you? (%)				
Health and physical well-being	83.4	90.5	90.0	
Smiles, happyness, playfullness	36.4	71.4	25.0	< .01
No demandingness	18.2	4.8	40.0	< .05
Which competences will be important for the future? (%)				
Cognitive competences	59.0	42.9	60.0	
.Formal training	22.7	4.8	45.0	< .05
Psychoaffective competences	45.4	52.4	20.0	.08
Morality and social conformity	66.2	28.6	55.0	< .05
In the perspective of a fair development what can parents do? (%)				
Caregiving and physical stimulation	50.0	28.6	70.0	< .05
Taking time with the child	59.1	76.2	35.0	< .05
Being involved in an affective relationship	54.5	47.7	10.0	< .01

Table 2

Infant's social environment

	Haitians	Quebeckers	Vietnamese	p
Number of adults in house hold ($\bar{H}$)	2.68	2.00	2.65	.06
Number of children in household ($\bar{H}$)	0.27	——	0.10	.06
Home density ($\bar{R}$)	0.66	0.41	0.64	< .001
Sleeping arrangment (%)				
In his/her bedroom	13.64	95.24	25.00	
In the parent's bedroom	86.36	4.76	75.00	< .001
Rides out of home (frequency by week %)				
Once or less	36.36	4.76	5.00	
Twice or more	64.64	95.24	95.00	
Visits to other homes (frequency by week %)				
Once or less	72.72	23.81	60.00	
Twice or more	28.28	76.19	40.00	< .01

Table 3

Infant's physical environment

	Haitians	Quebeckers	Vietnamese	p
Toys				
Mean	10.8	58.3	15.8	< .001
Range	2-33	25-119	4-54	
Small house material				
Mean	1.3	4.5	2.2	< .001
Range	0-5	1-9	0-7	
Infant's containers and stimulation apparatuses (%)				
Walker	90.9	66.7	90.0	
High-chair	27.3	85.7	40.0	< .001
Infant's seat	100.0	100.0	75.0	
Swing	27.3	61.9	25.0	< .05
Other (gross balls, cylinder, etc.)	9.0	42.9	20.0	< .05
Playpen	45.4	71.4	45.0	
Jolly-Jumper	——	23.8	10.0	
Rocking horse	4.5	9.5	5.0	

Table 4

Diagnostic clusters and mother's estimate

	Haitians	Quebeckers	Vietnamese
Diagnostic clusters			
Easy	9.09	71.43	5
Difficult	90.92	28.57	95
Mother's estimate			
Easy	36.36	52.38	45.00
Average	63.64	47.62	40.00
Difficult	0.00	0.00	15.00

Table 5

Mean scores and standard deviation on the Bayley's scales

	Haitians		Quebeckers		Vietnamese	
	M	sd	M	sd	M	sd
Mental	108.60	13.64	109.25	12.84	109.25	14.81
Motor	107.75	12.83	103.71	13.49	103.87	13.81